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APPLICANTS

Michael Paris, San Francisco, CA;

\*\* CONTINUING DATA \*\*\*\*\*

*none @ 01/05/06*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

*none @ 01/05/06*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED  
 \*\* 06/26/2004

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY CA	SHEETS DRAWING 11	TOTAL CLAIMS 12	INDEPENDENT CLAIMS 4
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Verified and Acknowledged

Examiner's Signature *[Signature]* Initials *[Initials]*

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TITLE  
 Methods and devices for determining exercise diagnostic parameters

FILING FEE  RECEIVED 1456	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____
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